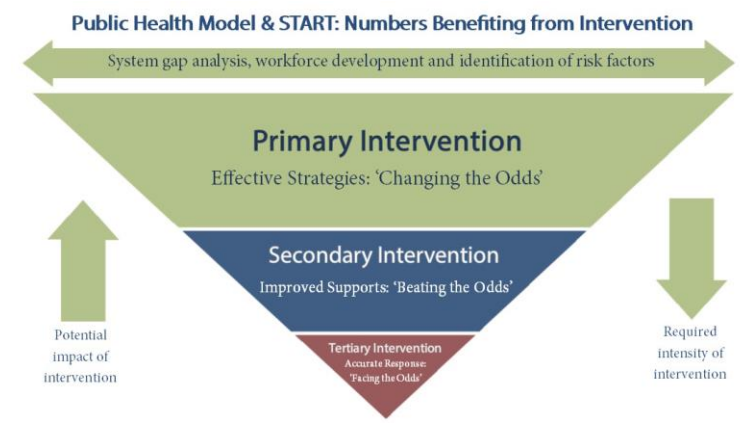


NH START

The START (Systemic, Therapeutic, Assessment, Resource, and Treatment) model was first developed in 1988 by Dr. Joan B. Beasley and her colleagues in Northeast Massachusetts. There are currently 15 states in the U.S., which provide START services. New Hampshire is one of the first to provide START services statewide. The program serves a target population of individuals with co-occurring intellectual disability and behavioral health needs. START is a short-term service and does not replace the need to continue with community supports and services already in place for individuals. START provides services for individuals ages 6 through the lifespan, experiencing developmental disability and mental health concerns.

The START mission is to enhance local capacity and provide collaborative, cost-effective support to individuals and their families through exemplary clinical services, education, and training, with close attention to service outcomes. Based on a public health tertiary care model, START services promote the ability for all individuals with disabilities to access appropriate supports and service in their local community, while offering additional resources and services as needed during times of complexity and crisis in pursuit of this effort.

Community Bridges has partnered with the Bureau of Developmental Services and University of New Hampshire Institute on Disability to establish NH START services. This began with the development of a statewide network of certified START Coordinators representing the 10 Area Agencies across the state



About NH START

- START = Systemic, Therapeutic Assessment, Resources, and Treatment www.centerforstartservices.com
- START is a systems-linkage approach to supports. The individuals who benefit from START have Intellectual/Developmental Disabilities (I/DD) and mental health challenges that negatively affect their quality of life. The underlying philosophy of START is that services are most effective when everyone involved in supports and treatment is allowed to participate actively in treatment planning and service decisions. In order for this to occur, collaboration between service providers and with service users is needed.
- START helps teams anticipate and prevent crisis and plan for what to do when it happens anyway.
- START is not here to take over a person/system and “fix it” or “them,” but to work with teams to build bridges for stronger supports. START does not replace any member of the team, but enhances the system that already exists.
- Driven by a person-centered approach in the context of the system of support, the START model offers proactive clinically-based consultation and training for crisis prevention and intervention.

Comprehensive Systems & Services Evaluation

An important service START provides is the Comprehensive Systems and Services Evaluation. Led by experts on the START model, evaluations provide a comprehensive overview of the systems of care in a region or state and illustrate where efficiencies, linkages, community involvement, and resources may be enhanced to strengthen service outcomes for individuals with intellectual/developmental disabilities and their families. This report represents evaluations and assessments throughout the individuals lifetime and interprets this data in a comprehensive evaluation.

Cross Systems Crisis Intervention Plan

The Cross-Systems Crisis Prevention & Intervention Plan (CSCPIP) is an individualized, person-specific written plan of response that provides a clear, concrete, and realistic set of supportive interventions that prevents, de-escalates, and protects an individual from experiencing a behavioral health crisis. The development of the CSCPIP is facilitated by the START Coordinator with the service recipient's circle of support in collaboration with other stakeholders that may be included in the planning and intervention process. The CSCPIP assists the circle of support in promoting positive coping strategies, preventing difficulty from occurring, de-escalating a person, and assuring the safety of the individual and others. In addition, the CSCPIP helps the individual's team reframe their understanding of the individual's challenges, promotes a strengths-based support approach, and encourages all team members to use proactive, early interventions to avoid increased stress and/or crisis. It is designed to be used in a variety of settings including the person's home, school, day supports and community. The CSCPIP should be shared with emergency supports personnel should they become involved in a crisis situation.

Training & Consultation

Expert training and consultation is offered through NH START Services in a variety of ways to START projects across the nation. From online meetings and trainings to in-person consultation, experts in the intellectual/developmental disability field lead trainings and consultation sessions to build capacity and strengthen systems of care for individuals with intellectual/developmental disabilities and their families.

Technical Support & Clinical Expertise

Driven by a person's needs, NH START Services offers clinically-based technical support and expertise that focuses on the systemic, therapeutic, assessment, respite, and treatment options for individuals with intellectual/developmental disabilities and their families.

The START Resource Center

The START Resource Center in the State of New Hampshire opened in 2014 and is operated by Community Bridges. The START Resource Center is designed to employ a positive, person-centered approach for assessment, crisis prevention and stabilization in the context of a safe, supportive therapeutic setting for those over the age of 21 who need them.

The START Resource Center can assist someone after discharge from a mental health facility, provide assessment and support to someone in distress, or give ongoing support to an individual who lives with their family but cannot benefit from traditional "respite" programs.

START Resource Centers promote person-centered approaches and training for individuals, families, and caregivers with therapeutic tools, provision of multi-modal clinical assessments, and therapeutic recreational experiences. All interventions and supports can be applied to the person's home setting, and occur with the active engagement of the individual's system of care.

All referrals are made through NH START coordinators. There is a maximum length of stay at the Center of no more than 30 days for emergency services, and no more than 5 days for planned services.

Eligibility for START Resource Center (Planned and Emergency Stays)

- Enrolled in START program and receiving services through an Area Agency
- Must be 21 years or older
- Voluntary stay
- Must have a verified place to return to
- Not actively homicidal or suicidal (cannot meet hospital committable criteria or willing to contract for safety)
- No recent history of forensic involvement, fire setting, sexual offense, etc.. (the definition of recent and active requires judgment and determined by the START Resource Center Leadership Team)
- No significant running/history of eloping from care (not someone who may choose to leave but people who would constantly run if not in locked program)
- No intensive toileting needs or assistance (responding to verbal cues or using incontinence products is supported)
- Must not need ongoing intensive medical supervision (no feeding tubes for example)
- Must be able to self-evacuate within 3 minutes from the START Center with or without prompts

For more information about NH START, contact Community Bridges at (603) 225-4153